PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Paparousis Reduction Act of 1005, no appears are required to respect to a policetion of information unless it items to a policetion of information unless items to a policetion unless items to a policetion unless items to a policetion unless it

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/518,506			ing Date 20/2004	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN
Н	FOR				IUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)
П	BASIC FEE (37 CFR 1.16(a), (b),	_	N/A	LD NO	N/A		N/A	TLE (0)	i	N/A	TLE (6)
┢	SEARCH FEE	or (c))	N/A		N/A	ı	N/A		1	N/A	
\vdash	(37 CFR 1.16(k), (i), (ii)		N/A	-	N/A		N/A		ł	N/A	
	(37 CFR 1.16(o), (p), (FAL CLAIMS	(p) 10	minus 20 = *				x \$ =		OR	x s =	
IND	CFR 1.16(i)) EPENDENT CLAIM	s	minus 3 = *			ı	x s =			x s =	
	CFR 1.16(h)) APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	specificates of paper 50 (\$125) ional 50 s	gs exceed 100 n size fee due for each n thereof. See CFR 1.16(s).							
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								1		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL	
	APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY			
AMENDMENT	02/10/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18()))	• 7	Minus	 20	= 0		X \$25 =	0	OR	x s =	
z	Independent (37 CFR 1,16(h))	• 3	Minus	 3	= 0	1	X \$105 =	0	OR	x s =	
₹	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)											
L		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
Z.	Total (37 CFR 1,16(i))		Minus	**	=		x \$ =		OR	x \$ =	
AMENDMENT	Independent (37 CFR 1.16(h))		Minus	***			x \$ =		OR	x s =	
핆	Application Size Fee (37 CFR 1.16(s))]		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR		
Γ									OR	TOTAL ADD'L FEE	
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

This collection of information is equated by 37 CER. 1.16. The information is required to obtain or retain a besteff by the public which his lost figured by the USFTO to monoceasil an application. Confidentiality is ownered by 80 Sec. 22 and 37 CEF 1.15. This collection is estimated in table 22 annuates to complete, another ingolates properties, and submitting the completed application form to the USFTO. Time well vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or seggestions for reducing this burdon, should be sent to the CEM information Officer. U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrias, VA 2213-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandrias, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS